PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10050007

CLAIMS AS FILED - PART (Column 1)					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			Ì				Γ	RATE	FEE	1	RATE	FEĘ
FOR			NUMBER FILED		NUMB	ER EXTRA	Ī	BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		*			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in c	olumn 2	L	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II								·			OTHER	THAN
		(Column 1)	(Colum					SMALL ENTITY		OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	E CLAIM	=		X42=		OR	X84=	
	FINST PRESE	INTATION OF M	OLTIPLE DEP	CINDEIN	CLAIIVI			+140=		OR	+280=	
							L	TOTAL		OR	TOTAL	
		(Column 1)		(Colui	mn 3)	(Column 3)	А	DDIT. FEE			ADDIT. FEE	
Γ		CLAIMS		HIGH	EST		lг		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT	10.7	NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM	. []	╏┠		·			
							L	+140=		OR	+280=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	IULTIPLE DEI	PENDEN'	T CLAIM		J ├					
*	If the entry in colu		+140=		OR	+280=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	nber Previously Pa	aid For" (Total o	r Independ	lent) is the	e highest numbe	er foui	nd in the app	propriate bo	x in co	lumn 1.	